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Application Number CHANGE OF 1703 774 Filing Date OI NOVEMBER 2000 CORRESPONDENCE ADDRESS **First Named Inventor Application** LOUES UETI Art Unit 600E Address to: **Examiner Name Assistant Commissioner for Patents** OI B Washington, D.C. 20231 Attorney Docket Number 594-8389A-US Please change the Correspondence Address for the above-identified application Place Customer Customer Number Number Bar Code Type Customer Number here Label here OR change of address Firm or **Individual Name** <u> WesternGeco, L.L.C.</u> Address **Address** P.O. BOX 2469 City Houston ZIP State าาลรล Country Telephone 1616702616-P80-EIT Fax 713-689-1977 This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the:

Applicant/Inventor.	
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Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

Attorney or Agent of record.

Registered practitioner named in the application transmittal letter in an application without an

executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number ___

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